1	PATEN	T APPLICATI				TION REC	ORI	5	ار / ا	11011	ation of Docket Number			
Effective October 1, 2003													14_	
		CLAIMS A	AS FILED (Colum			olumn 2)		SMALL TYPE	ENTITY		OR		R THAN L ENTITY	
	TOTAL CLAIM	is]	RATE	E FE		.	RATE		
F	FOR		NUMBE	R FILED	NUM	MBER EXTRA	1 '	BASIC F			OR			
T	OTAL CHARGE	EABLE CLAIMS	n	ninus 20=	*		1 1	X\$ 9=	_		OR.			
II —	NDEPENDENT (minus 3 =	*	,	1	X43=			OR	\		
М	ULTIPLE DEPE	ENDENT CLAIM F	PRESENT					+145=						
*	if the differenc	ce in column 1 is	s less than ?	zero, enter	r " 0 " in	column 2	' I	+145=			OR OR	L	-	
	. •1	CLAIMS AS A	AMENDE	.D - PAR	TII /	8-4-0	14	10,,			Ŋ'n	OTHER	THAN	
_		(Column 1)		(Colum	mn 2)	(Column 3)	ί,	SMALI	L ENTIT		OR _	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI TIONA FEE	AL		RATE	ADDI- TIONAL FEE	
NO.	Total	+ /3	Minus	** 4/	4	=		X\$ 9=			OR	X\$18=		
AME	Independent	* / SENTATION OF MI	Minus	*** //	<u> </u>	=	1 [X43=	1		OR	X86=		
	FIRST FILES.	ENTATION OF WI	ULTIPLE DE	PENDENT	CLAIN		1	+145=	1	\neg	OR	+290=		
					,		L	TOTAL			Ĺ	TOTAL		
		(Column 1)		(Colum		(Column 3)		ADDIT. FEE	<u> </u>		L' A	ADDIT. FEE	<u></u>	
NDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID FO	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE	AL.		RATE	ADDI- TIONAL FEE	
NO.	Total	*	Minus	**		=		X\$ 9=		OF	R	X\$18=	<u> </u>	
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	FIRST PHESE	ENTATION OF MU	JLTIPLE DEP	'ENDENT C	CLAIM		-	+145=	+			+290=	<u> </u>	
							_	TOTAL		OR		TOTAL	•	
_		(Column 1)		(Column	n 2) _	(Column 3)	AD	DDIT. FEE	<u> </u>		1 AL	DDIT. FEE		
AENT C		CLAIMS REMAINING AFTER AMENDMENT	Ē	HIGHES NUMBE PREVIOU PAID FO	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		ſ	RATE	ADDI- TIONAL FEE	
Z -	Total		Minus	**		=		X\$ 9=		OR		X\$18=		
AME	Independent	<u> </u>	Minus	***		=	-	X43=	6	1	` -	X86=		
	FIRST PRESE	ENTATION OF MU	LTIPLE DEP	ENDENT C	LAIM		\vdash			OR	`ㅏ		·	
* If	the entry in colur	mn 1 is less than the	e entry in colur	mn 2, write "(0" in colu	umn 3.	L	+145= TOTAL	<u> </u>	OR	` L	+290=		
***	f the "Highest Nurr f the "Highest Nurr	mber Previously Paid Imber Previously Paid	iid For." IN THIS aid For" IN THIS	S SPACE is le S SPACE is le	ess than : less than	20, enter "20."		DIT. FEE	<u></u>	OR	ΑD	TOTAL ODIT. FEE		
• • •	16 Hignest Num	nber Previously Paid	For" (Total or i	Independent)) is the h	nighest number f	iound	in the app	ropriate be	òx ju co	olum ,	an 1.		